FOOT AND MOUTH DISEASE: STATUS QUESTIONNAIRE

REPLY FOR GREECE, LUXEMBURG AND PORTUGAL

References are to Directive 85/511/EEC on FMD control, unless otherwise mentioned.

Luxemburg and Portugal are recognised by OIE as free from FMD.

1. Has FMD ever occurred in your country? if yes, please answer the following questions.

Yes

a. What type of program was used to eradicate the disease?

Eradication was carried out by compulsory slaughter and destruction by burning or burial of all susceptible species on the affected holding, and on any dangerous contact holdings. Contaminated material is also destroyed. Movement restrictions were imposed in the surrounding infected and surveillance zones.
This policy is a legal requirement under the provisions of Council Directive 85/511/EEC in all EC Member States.

b. Was vaccine used for control? If so, what date and year was the last animal vaccinated? What species were affected?

Routine vaccination was used in these Member States until 1/4/91 (Luxemburg and Belgium). Since 1 August 1991, no vaccine has been used in any EC country. Vaccine was used predominantly in cattle, but sheep, goats and pigs were included in some cases. Emergency vaccination was not employed during an outbreak after the date of cessation of routine vaccination. Import of vaccinated animals is prohibited.

2. If ever present in your country, when was the last case of FMD diagnosed?

Greece	*30/9/96*
Luxemburg	*1964*
Portugal	*1984*

a. Is there laboratory confirmation of each suspected case of this disease?

Diagnosis in a primary case is always confirmed by laboratory tests. During the course of an epizootic, disease may be confirmed without laboratory confirmation,ro speed up eradication, but negative results must be checked by laboratory tests. (Article 4.1)

b. Are laboratory procedures used for confirming diagnosis in each suspicious case?

Yes, unless an official investigation is able to rule out the possible presence of FMD on clinical grounds.

c. What laboratory is available for official diagnosis?

Greece	*Institute for FMD and exotic diseases, Attiki 15310, Athens, Greece*
Luxemburg	*National Institute for Veterinary Research, Groeselenberg, Uccle, Brussels, Belgium*
Portugal	*Institute for Animal Health, Pirbright, UK.*

Until April 1995, The Institute for Animal Health, Pirbright, UK, was the Community Reference Laboratory (CRL) for FMD diagnosis. Samples are still sent there from Member States for confirmation and typing within the role of Pirbright as World Reference laboratory (WRL).

3. If an outbreak should occur, what procedures would be used for control?

a. Total depopulation with burial, burning, or rendering of infected herds?

Yes - burial is the method of choice, burning and rendering would be avoided if possible.

b. Would slaughter with carcass salvage at abattoir be permitted (salvage of apparently healthy animals from herds or exposed herds)?

No. This is prohibited under EC legislation.

c. Is garbage feeding to swine now permitted? If so, what restrictions, if any, are imposed?

Garbage feeding is permitted under EC law, following heat treatment under official control under the provisions of Article 15 of Council Directive 80/217/EEC on control of hog cholera. Holdings where garbage feeding is permitted may only send pigs for slaughter. The feeding of material from international means of transport is prohibited.
However, garbage feeding is prohibited in Luxemburg.

d. What are the restrictions placed on domestic livestock exposed to communicable diseases (quarantines, etc.)? Are there more stringent restrictions imposed if the disease is FMD?

Council Directive 85/511/EEC defines the minimum restrictions for FMD (see Articles 4, 5 and 6).
Council Directive 92/119/EEC covers other List A diseases of ruminants, especially Rinderpest, Peste des petits ruminants (PPR), Bluetongue, Capripox, Vesicular stomatitis, Lumpy Skin Disease and Rift Valley Fever (see Articles 4, 5 and 6).

Both Directives provide for a standstill on animal movements in the case of suspicion of infection or contact with infection. The period and degree of movement restrictions depends on the incubation period and the transmissibility of the disease. FMD is regarded as the most serious of these diseases.

The provisions of these Directives are the minimum standards. Member States can, and often do, go beyond the Directive requirements. In the event of an outbreak of any animal disease, the Commission is required to examine the measures put in place by the Member States, in order to determine whether or not they are sufficient and if they are in compliance with the Directives. The Commission may require additional measures on its own initiative or following an opinion of the Standing Veterinary Committee. See Doc VI/1526/92 Rev 4 on the strategy for disease control in the Single Market.

e. Are epidemiological investigations to determine the source of infection routinely practiced?

Yes - see Articles 7 and 8).

4. What laws and regulations are in effect for domestic livestock disease programs? Are there any specifically for FMD? Do they cover:

Council Directive 85/511/EEC lays down the measures to be taken to eradicate FMD and to prevent spread. This has been in force in the EU since 1 January 1987.

This Directive provides for

a. Mandatory reporting? If so, by whom and to whom?

a. Mandatory reporting (Article 3) by any person suspecting the presence of FMD to the competent authority of the Member State. Member States must also inform the Commission when the disease is confirmed (Directive 92/894/EEC), using the computerised Animal Disease Notification System (ADNS)..

b. Specific quarantine procedures in affected areas? Are quarantines placed on premises and/or areas where a case is suspected, pending final diagnosis?

See Article 4 of Directive 85/511/EEC. Requirements are:
census of animals on holding,
all animals isolated in living accommodation,
no animals to enter or leave holding,
meat, milk etc may not be moved of except under licence,
movements of persons, vehicles etc subject to authorisation,
disinfection meausres.
These measures may be extended to other holdings if there are grounds to suspect contamination. These measures remain in place until FMD has been ruled out.

c. Disposition of exposed animals?

All animals of susceptible species on an infected holding are slaughtered and the carcases buried. Burning or rendering may also be permitted. Rendering must be done in a high risk plant (as defined in Directive 90/667/EEC; such plants must achieve 133°C at 3 bar for 20 minutes. Salavage of any part whatsoever is not permitted.

d. Control of movements into and out of affected areas?

b, c and d. The premises is placed under restrictions on notification of suspicion.(Article 4) Adjacent holdings may also be restricted. The measures remain in force until disease is ruled out. Area restrictions are not normally imposed prior to confirmation, but could be if it was felt necessary by the veterinary authorities. Additonal restrictions are imposed if disease is confirmed on the premises (Article 5), on contact premises (Article 8) and on the surrounding area (Article 9). An infected zone of minimum radius 3km and a surveillance zone of minimum radius 10km is imposed. These areas may be increased in the light of epidemiological studies by the Member State, or by a Commission Decision (safeguard measures).

The Commission is not obliged to introduce safeguard measures if it is satisfied that the Member State has taken sufficient meaures and complies with the Directive. See Doc VI/1526/92 Rev 4 on the strategy for disease control in the Single Market for a more complete description of the EC procedures.

NOTE: Please forward copies of such laws, regulations, and policies (English translation required) along with this completed questionnaire to the address on page one.

5. What are the existing diagnostic capabilities for FMD?

a. Laboratory facilities

See list of laboratories in Directive 85/511/EEC

Only these are permitted to handle FMD virus. Samples may be received by other labs but these would be restricted to sample preparation. No culture or testing would take place.

b. What security measures (such as air filtration) are used to prevent escape of biological agents in the laboratory?

a & b All laboratories authorised to handle FMD virus in the Community are listed in Council Directive 85/511/EEC. All must comply with the Minimum Standards for FMD laboratories recommended by FAO. The most recent version is attached. This document was prepared by the Scientific Veterinary Committee of the EC, and approved by FAO and OIE. The requirements include negative pressure and HEPA filtration of exhaust air.

The diagnostic laboratories in all three countries have been inspected by EC experts. Pirbight and Uccle laboratories were found to be satisfactory. Deficiencies were

found in the Athen lab. Consequently, pending full upgrading of the Athens lab, it was restricted to the intial preparation of samples which were then submitted to Pirbright. The Greek authorities have now informed the Commission that the lab has been reconstructed to meet FAO standards. An inspection is expected in the near future.

c. What specimen collections are routinely followed? (Please outline)

Samples are taken in accordance withl protocols established by the Scientific Veterinary Committee in document VI/2303/91 attached. Samples for virus isolation are packed in wet or dry ice, and sent by courier to the lab (national and/or reference).

d. What diagnostic methods are used?

(1) Procedures (necropsy finding, blood assay, etc.).

(2) Techniques (fluorescent antibody tests, etc.)

d. . Vesicular fluid and epithelium is collected if available. Whole blood is collected for serological and virological investigation. Other tissues obtained at necropsy may also be collected. Serological tests used are ELISA and VNT. Diagnosis is carried out in accordance with the recommendations of the Scientific Veterinary Committee (Doc VI/2303/91).

e. Are all suspected vesicular diseases also tested for FMD?

(1) Test procedures used?

(2) Serotyping performed?

Yes, and for SVD where appropriate. Protocols are as recommended by the Scientific Veterinary Committee in Doc VI/2303/91.

f. What is the size of the veterinary force available for carrying out regulatory programs for livestock diseases? Are all officers veterinarians, or are lay personnel also employed? Are lay inspectors under the direct supervision of veterinary officers?

All Member States have presented contingency plans which include details of available staff - summaries attached (doc VI/6723/92).

Specific more recent details are as follows:

Greece *810 official veterinarians, 70 laboratory veterinarians, 190 lay assistants. All are under the control of the State Veterinary Service. All may be called in to assist in emergency measures.*

Portugal *10 vets for crisis unit, 115 for emergency measures and a further 230 available if needed. All under State control.*

Luxemburg *50 veterinarians are available to carry out regulatory programmes. Lay inspectors are not under the direct supervision of veterinary officers.*

6. Surveillance procedures used to locate outbreaks of infection.

a. The method and statistical data on serological sampling?

Active surveillance is not normally carried out. However, following the series of outbreaks in Greece from 1994 to 1996, extensive serology has been carried out. A full report of the epizootic which ended on 30/9/96 is appended. The surveillance methodology, with serological results and action taken, is described on pages 20 to 23.

b. The estimated number of animals that were vaccinated and could have vaccination titers?

Since the last vaccination in the EC took place in 1991, it is unlikely that there will be animals with vaccination titres, except cattle born before that date. Such cattle may not be traded within Member States, and imports of vaccinated animals are not permitted.

c. Reporting method of suspicious vesicular conditions to the National veterinary Services?

See 4a above. Phone and fax are used.

d. Reporting method of suspicious and/or confirmed FMD conditions to other countries?

e. How rapidly will the international community be informed of suspicious and/or confirmed FMD?

d.& e. Confirmed cases are notified by computer link to the Commission and other EU countries. Notification is also sent to OIE by fax or telex in accordance with its rules for frequency and format of reports.

7. After depopulation of an area that was infected with FMD, what methods are used to detect and prevent introducing infection through repopulation?

Comment: it is not routine to depopulate an <u>area</u> following an FMD outbreak. The replies therefore refer to action on infected holdings. Restrictions on the affected areas remain in place until the competent authority is satisfied that the disease has been eradicated.

a. Has total repopulation occurred?

Yes

b. Are all cloven-hoofed animals serologically tested negative?

Routine tests are not necessarily carried out, because the animals in surrounding farms are fully susceptible. However, extensive serology was carried out in Greece following the last outbreak - see Doc VI/6490/97.

c. Are vaccinated animals used for repopulation? *No*

d. What surveillance procedures are used in the repopulated areas?

All herds are monitored for clinical signs. It is assumed that the presence of virus will manifest itself as disease as the entire EC herd is fully susceptible.
Sentinel animals may be used where judged necessary. In Greece, sentinel cattle were placed at 8 locations in 1994 and 4 locations in 1996. All were tested for seroconversion prior to final lifting of restrictions. Serosurveys will also be carried out where the results of epidemiological studies suggest the need.

8. What laws, regulations, and policies govern the importation of live animals, animal products. and byproducts of species susceptible to FMD? Copies of these laws, regulations and policies (English translation required) must be forwarded to APHIS in Washington. D.C. along with the completed questionnaire.

See attached Directive 72/462/EC covering general principles. This Directive is implemented by a series of country- and product-specific certificates. Directive 80/215/EEC lays down approved methods of treatment of meat products from zones or countries with FMD. Directive 92/118/EEC lays down animal health rules for import of products and by-products such as hides, sera, milk products etc. Directive 88/407/EEC, 89/556/EEC and 90/429/EEC cover trade and imports of bovine semen and embryos and pig semen respectively.

ADDITIONAL INFORMATION

FMD type A_{22} and O_1 (Middle east strains) are present endemically in Turkey, although the European part (Thrace) had been free from 1991 to 1995. Vaccine is used routinely in Asiatic Turkey, but had been used only in an emergency in Thrace until 1997, when 95% of the susceptible animals were vaccinated. The Community, in conjunction with the European FMD Commission of FAO, is currently discussing a cooperation agreement with Turkey with the objective of controlling and eventually eradicating FMD .

Greece has a border with Turkey, in the region of Evros. In order to mitigate the risk of extension of infection in the territory of Greece, certain measures are in force:

- *Prior to movement, ruminants must be inspected by a veterinarian, and the movement must be accompanied by a health certificate,*
- *Any ruminant which is moved for breeding or fattening must first be serologically tested with negative results.*

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